SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature X. House B. Agent Addressee B. Received by (Printed Name)
Captain Horace Burton Frank Lee Youth Center PO Box 220410	D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
Deatsville, AL 36022 D7 CV 82 C, And Cup & OP 2. Article Number	3. Service Type Li Certified Mail Registered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee)
(Trensfer from service label) 700L	L les
PS Form 3811, February 2004 Domestic Retu	ביבה מחמר מדום חקום

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature X Council Button: Agent Addressee B. Received by (Printed Name) C. Date of Delivery HORACE Button: 1/15/07
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
Warden John Cummins Frank Lee Youth Center PO Box 220410	
Deatsville, AL 36022	3. Service Type Lid Certified Mail Registered Return Receipt for Merchandise
D7cv82 C, Amd Cmp + OP	☐ Insured Mail ☐ C.O.D.
2. Article Number	4. Restricted Delivery? (Extra Fee)
(Transfer from service label) 7006 27	PO 0005 9743 JSPS
PS Form 3811, February 2004 Domestic Retu	rn Receipt 102595-02-M-1540

102595-02-M-1540 ;

Complete items 1, 2, and 3. Also complete	COMPLETE THIS SECTION ON DELIVERY A. Signature
item 4 if Restricted Delivery is desired. Print your name and address on the reverse	X Agent
so that we can return the card to you	Addressee
Attach this card to the back of the mailpiece, or on the front if space permits.	B. Received by (Printed Name) C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item 1? Yes
~	If YES, enter delivery address below: ☐ No
Sgt. Vivian Langford	
Frank Lee Youth Center	
PO Box 220410	
Deatsville, AL 36022	3. Service Type
- 521571115, 71E 55022	☐ Certified Mail ☐ Express Mail
~~~	Registered Return Receipt for Merchandise
D7CV82 C, Amd Comp & OP	☐ Insured Mail ☐ C.O.D.
2. Article Number	4. Restricted Delivery? (Extra Fee) ☐ Yes
(Transfer from service label)	2760 0002 8193 1293
PS Form 3811, February 2004 Domestic Ret	Purp Popolist
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TO SECTION	COMPLETE THE SECTION ON DELIVERY
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